

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J22436

FILED
Apr 21, 2009
Secretary of State

Entity Name: SHAMROCK INVESTMENTS OF FORT PIERCE, INC.

Current Principal Place of Business:

C/O MCALPIN, CAVALCANTI & LEWIS, CPAS
PO BOX 3688
FORT PIERCE, FL 34948

New Principal Place of Business:

C/O MCALPIN, CAVALCANTI & LEWIS, CPAS
315 AVENUE A
FORT PIERCE, FL 34950

Current Mailing Address:

C/O MCALPIN, CAVALCANTI & LEWIS, CPAS
PO BOX 3688
FORT PIERCE, FL 34948

New Mailing Address:

C/O MCALPIN, CAVALCANTI & LEWIS, CPAS
315 AVENUE A
FORT PIERCE, FL 34950

FEI Number: 59-2692662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLE, ROBERT G
8618 WHITE EGRET WAY
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: COLE, ROBERT G
Address: 8618 WHITE EGRET WAY
City-St-Zip: LAKE WORTH, FL 33467

Title: D () Delete
Name: COLE, ROBERT G
Address: 8618 WHITE EGRET WAY
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT G. COLE

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date